SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X Allamba Liva Addressee B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes / If YES, enter delivery address below: ☐ No
Gerdau Ameristeel 300 Ward Road	653056
Midlothian, TX 76065	3. Service Type ☑ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) (7007 2560 0002 7736 8592	
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

Sender: Please print your name, address, and ZIP+4 in this box

Hardalahahallarahahahahahahahahahahanall

Kelvin L. Spencer
Enforcement Officer
Environmental Protection Agency
Superfund Division
1445 Ross Avenue, Ste. 1200 (6SF-TE)
Dallas, TX 75202